



STATE OF MARYLAND

DHMH

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Office of Preparedness & Response

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October 19, 2007

Public Health & Emergency Preparedness Bulletin: # 2007:41 **Reporting for the week ending 10/13/07 (MMWR Week #41)**

CURRENT HOMELAND SECURITY THREAT LEVELS

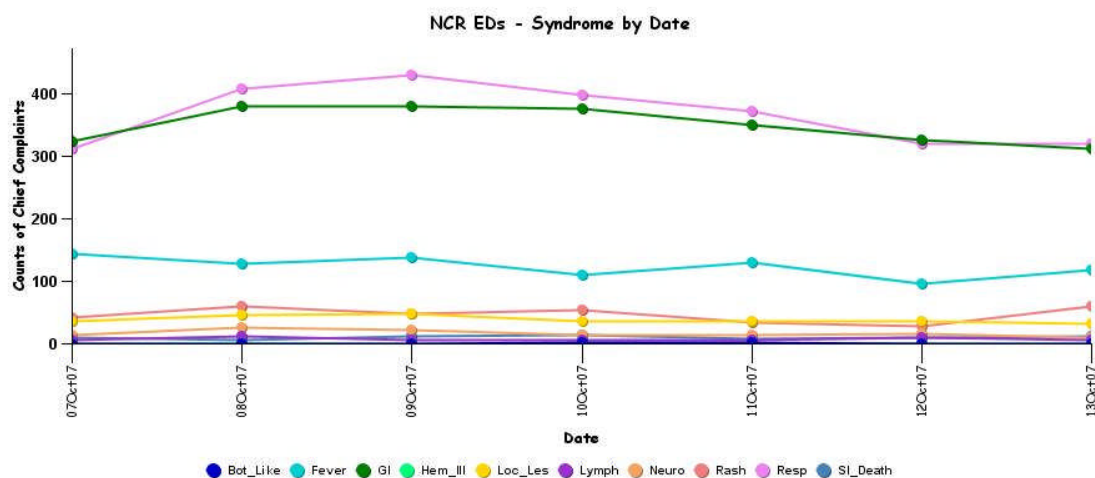
National: Yellow (ELEVATED) *The threat level in the airline sector is Orange (HIGH)
Maryland: Yellow (ELEVATED)

SYNDROMIC SURVEILLANCE REPORTS

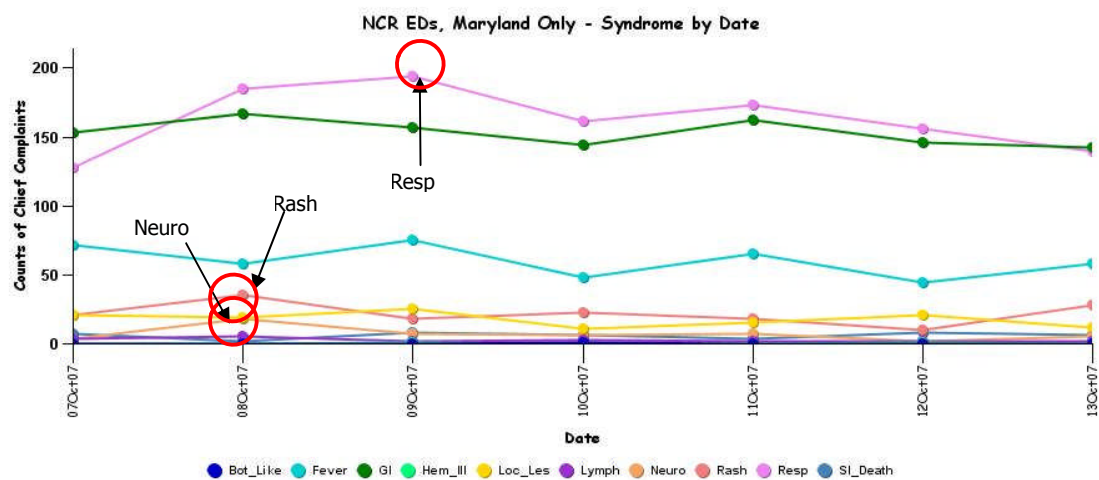
ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics):

Graphical representation is provided for all syndromes, excluding the "Other" category, all age groups, and red alerts only. Note: ESSENCE – ANCR Spring 2006 (v 1.3) now uses syndrome categories consistent with CDC definitions.

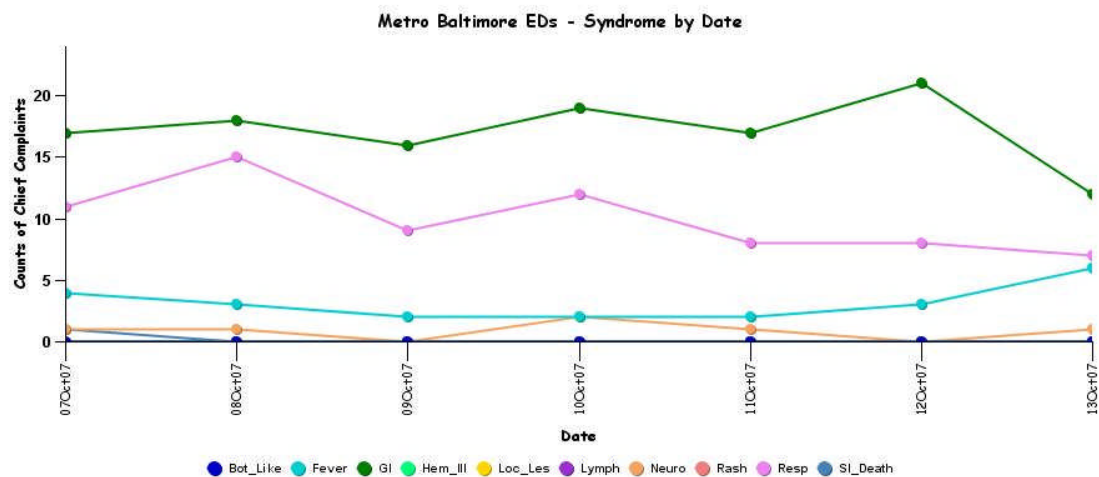
Overall, no suspicious patterns of illness were identified. Track backs to the health care facilities yielded no suspicious patterns of illness.



* Includes EDs in all jurisdictions in the NCR (MD, VA, DC) under surveillance in the ESSENCE system

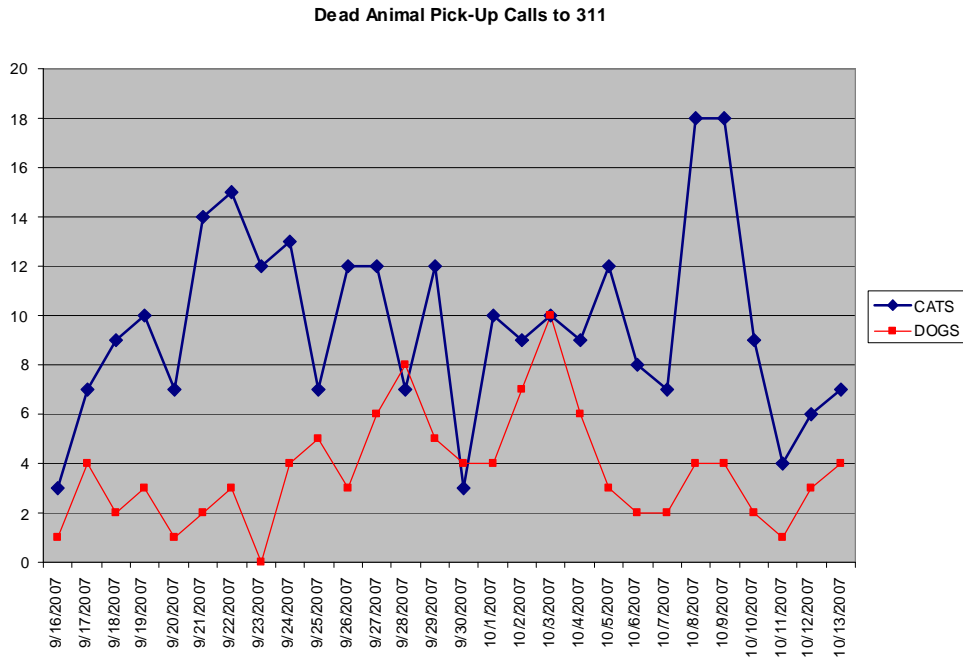


* Includes only Maryland EDs in the NCR (Prince George's and Montgomery Counties) under surveillance in the ESSENCE system



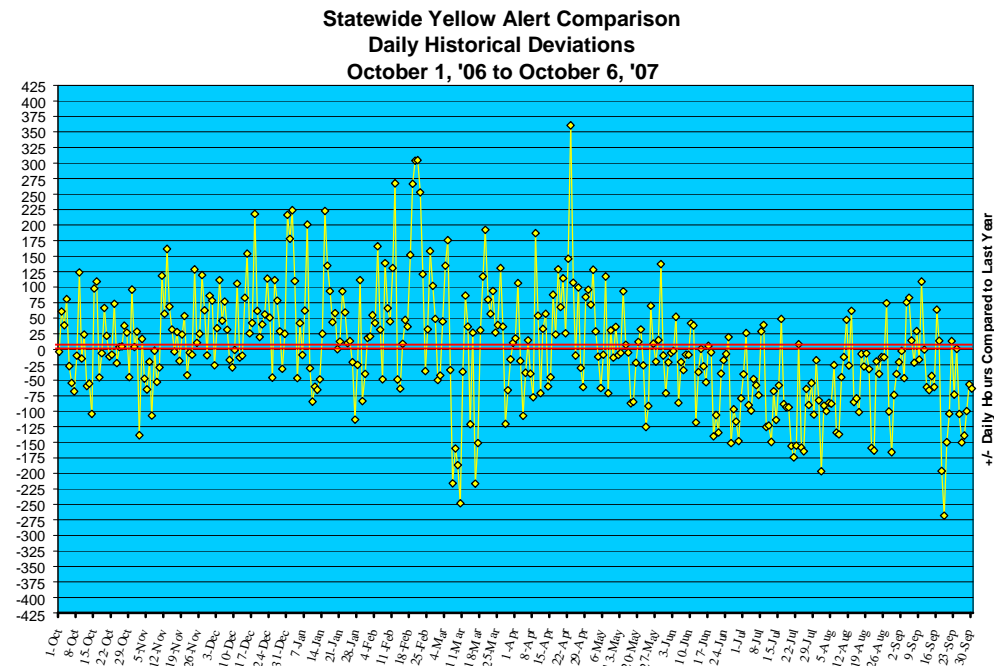
* Includes EDs in the Metro Baltimore region (Baltimore City and Baltimore County) under surveillance in the ESSENCE system.

BALTIMORE CITY SYNDROMIC SURVEILLANCE PROJECT: No suspicious patterns in the medic calls, ED Syndromic Surveillance and the animal carcass surveillance. Graphical representation is provided for animal carcass surveillance 311 data.



REVIEW OF EMERGENCY DEPARTMENT UTILIZATION

YELLOW ALERT TIMES (ED DIVERSION): The reporting period begins 10/01/06.



REVIEW OF MORTALITY REPORTS

OCME: OCME reports no suspicious deaths related to BT for the week.

MARYLAND TOXIDROMIC SURVEILLANCE

Poison Control Surveillance Monthly Update: Investigations of the outliers and alerts observed by the Maryland Poison Center and National Capital Poison Center in September 2007 did not identify any cases of possible terrorism events.

REVIEW OF MARYLAND DISEASE SURVEILLANCE FINDINGS

COMMUNICABLE DISEASE SURVEILLANCE CASE REPORTS (confirmed, probable and suspect):

Meningitis:	<u>Aseptic</u>	<u>Meningococcal</u>
New cases:	15	0
Prior week:	13	0
Week#41, 2006:	11	0

OUTBREAKS: 4 outbreaks were reported to DHMH during MMWR Week 41 (Oct. 7- Oct. 13, 2007):

1 Gastroenteritis outbreak

1 outbreak of GASTROENTERITIS associated with a Nursing Home

1 Foodborne Gastroenteritis outbreak

1 outbreak of FOODBORNE GASTROENTERITIS/SALMONELLOSIS associated with a Restaurant

2 Respiratory illness outbreaks

1 outbreak of INFLUENZA-LIKE ILLNESS/PNEUMONIA associated with a Nursing Home

1 outbreak of INFLUENZA-LIKE ILLNESS/PNEUMONIA associated with a School

MARYLAND SEASONAL FLU STATUS:

Seasonal Influenza reporting occurs October through May. No cases of influenza were reported to DHMH during MMWR Week 41 (October 7 - 13, 2007).

***Please note:** Influenza data reported to DHMH through the National Electronic Disease Surveillance System (NEDSS) is provisional and subject to further review.

PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO Pandemic Influenza Phase: Phase 3/4: No or very little human-to-human transmission/Small clusters with limited human-to-human transmission, suggesting that the virus is not well adapted to humans

US Pandemic Influenza Stage: Stage 0/1: New domestic animal outbreak in at-risk country/Suspected human outbreak overseas

*More information regarding WHO Pandemic Influenza Phase and US Pandemic Influenza Stage can be found at:
<http://bioterrorism.dhmh.state.md.us/flu.htm>

WHO update: As of October 12, 2007, the WHO-confirmed global total of human cases of H5N1 avian influenza virus infection stands at 331, of which 202 have been fatal. Thus, the case fatality rate for human H5N1 is about 61%.

AVIAN INFLUENZA, HUMAN (Indonesia): 8 Oct 2007, The Ministry of Health of Indonesia has announced a new case of human infection of H5N1 avian influenza. A 44 year old woman from Pekanbaru City in Riau Province developed symptoms on Oct 1 and died on Oct 6. A team is currently investigating the case to determine the source of her exposure. All of the contacts are being monitored but all remain healthy. Of the 108 cases confirmed to date in Indonesia, 87 have been fatal.

AVIAN INFLUENZA, HUMAN (Indonesia): 12 Oct 2007, As of 12 Oct 2007 The Ministry of Health of Indonesia has announced a new case of human infection of H5N1 avian influenza. A 12 year old boy from Tangerang District in Banten Province developed symptoms on September 30 and is currently in hospital. The investigation team found that he had direct contact with dead chicken near his school in the days before his illness. Of the 109 cases confirmed to date in Indonesia, 87 have been fatal.

NATIONAL DISEASE REPORTS:

E. COLI O157, GROUND BEEF (Multi State): 7 Oct 2007, Cargill Meat Solutions said it is voluntarily recalling approximately 844,812 pounds of frozen ground beef patties because they may be contaminated with E. coli O157:H7. The recall is based on an investigation by the Minnesota Department of Health and Minnesota Department of Agriculture as well as Cargill's investigation and findings from a food safety assessment conducted by the U.S. Department of Agriculture at the Cargill Meat Solutions ground beef plant in Butler, Wisconsin. Minnesota officials had investigated 4 cases of E. coli O157:H7 infection involving individuals who had consumed American Chef's Selection Angus Beef Patties purchased at Sam's Club stores in the state. While the investigation is ongoing, Cargill is voluntarily recalling the products based on a preliminary analysis of epidemiological data. The products subject to the recall were produced on Aug 9, 10, 15, 16 and 17, 2007 and were distributed nationwide. Each package bears the establishment number "Est. 924A" inside the USDA mark of inspection. "We are concerned that some consumers may still have the product sold at retail in their freezers," said Bill Rupp, president of Cargill Meat Solutions. "We and Sam's Club are urging customers to return or destroy any American Chef's Selection Angus Beef Patties purchased in any of their stores since August 2007." Rupp said the company learned of the situation shortly before noon on Oct 5. Based on information from Minnesota and USDA officials, the company investigated further and expanded the scope beyond Minnesota. Although the extent of any contamination is unknown, Cargill Meat Solutions has undertaken the voluntary recall as a proactive and cautionary step. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

SALMONELLOSIS, FROZEN POULTRY PIE, RECALL (Multi State): 13 Oct 2007, ConAgra Foods announced on Oct 11, that it is continuing its efforts to ensure consumer safety by voluntarily recalling all varieties of Banquet brand frozen pot pies and all varieties of store brand frozen pot pies sold under the names of Albertson's, Hill Country Fare, Food Lion, Great Value, Kirkwood, Kroger, Meijer and Western Family. Earlier this week, ConAgra Foods was contacted by state health officials regarding concerns that some of its Banquet poultry pot pie products may be linked to an outbreak of salmonellosis. In cooperation with the American Department of Agriculture (USDA), on Oct 9, ConAgra Foods directed retailers to remove the poultry pot pies from shelves, suspended pot pie production in its Marshall, MO, plant and advised consumers to not eat these products and discard these products while an investigation was conducted. As that investigation continues, ConAgra Foods today voluntarily issued the recall to ensure the utmost clarity for consumers about the fact that they should not eat these products. In addition, to avoid any confusion on pot pie varieties, ConAgra Foods has simplified the recall to include all Banquet and store brand pot pie varieties. As conveyed earlier this week, ConAgra Foods reminds consumers that these products are not ready-to-eat. Before the product returns to market, the company will revise on-package cooking directions to provide additional clarity on proper preparation by consumers. Proper cooking of all not-ready-to-eat products, including pot pies, is specifically designed to eliminate the presence of common pathogens found in many uncooked products. The CDC is collaborating with public health officials in multiple states across the United States and with the US Department of Agriculture Food Safety Inspection Service to investigate the ongoing multi-state outbreak. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

HANTAVIRUS (South Dakota): 13 Oct 2007, The South Dakota Health Department says hantavirus has caused the death of a McCook County resident. A total of 2 other lives in south eastern South Dakota have been claimed by the virus in the past 3 years. Earlier deaths were in Turner and Bon Homme counties. Hantavirus, which is carried by rodents, attacks the lungs and blood vessels. South Dakota has had 13 hantavirus cases since 1993. The primary carrier of the disease in South Dakota is the deer mouse, which is found statewide. People are infected when they breathe in the aerosolized virus from droppings, urine or saliva of rodents. (Emerging Infectious Diseases are listed in Category C on the CDC list of Critical Biological Agents) *Non-suspect case

INTERNATIONAL DISEASE REPORTS:

CHOLERA, DIARRHEA (West Africa): 7 Oct 2007, In Niger, from January to August 2007, 13 276 cases and 6 deaths were reported due to diarrhea. This is almost double as compared to the year 2006 at the same period; 24 cases and 2 deaths due to cholera were reported in July 2007. In Togo, the Togolese Red Cross reports elevated numbers of people

suffering from gastroenteritis. In Sierra Leone, the MoH reported 523 cases of acute watery diarrhea with 30 deaths in the Kambia district since early September 2007. (Water Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

CHOLERA (Syria/Iran border): 8 Oct 2007, Despite the efforts of the Iraqi government and WHO to contain a recent cholera outbreak, the disease has already spread to half of the country and has also crossed the border into Iran, according to WHO and Iranian authorities. Refugee camps on Iraq's borders and inside Iran, Syria, and Jordan have been warned of the outbreak by the UN Refugee Agency (UNHCR). "Many of us are suffering from diarrhea. Doctors are not always available and this week we discovered that 2 men who were at our camp for a short period of time are now in Baghdad being treated for cholera," said a 36 year old displaced woman living in a camp on the Iraqi-Syrian border. "We are living in an unhygienic environment. Toilets are close to our living quarters, vegetables and beans are not washed properly. We're therefore vulnerable to catching the disease," she added. (Water Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

DYSENTERY (Nepal): 8 Oct 2007, Local newspaper The Himalayan Times reported on Oct 8 that 7 people died of dysentery in southern Nepal districts on Oct 7. A senior official at district public health office, Rakesh Kumar Thakur said 5 were dead in Saptari district of Sagarmatha Zone, some 190 km south of capital Kathmandu. Thakur said the disease had affected 50 000 people in different villages of the district. He added the health teams had admitted that the disease outbreak was getting out of hand, and all stocks of medicines and saline water at the district public health office had run out. Sagarmatha zonal hospital superintendent Kedar Giri said the prevailing temperatures of 95 - 100.4 deg F were ideal conditions for the breeding of dysentery bacteria. Dr Giri said that 15 dysentery patients were arriving at the hospital daily. According to him, each patient needed at least 60 bottles of saline water. Elsewhere, 3 people died of dysentery in Mahottari district on Oct 8. Over 200 people have been afflicted with the disease, the district public health office said. The chief of the office said that consumption of contaminated drinking water and small fish from the paddy fields are the main factors responsible for the outbreak of dysentery. Dysentery has spread in over 6 villages of Mahottari district, some 130 km south of capital Kathmandu. (Water Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

EASTERN EQUINE ENCEPHALITIS (Scotland): 8 Oct 2007, A Briton who is in a coma after being bitten by a mosquito is thought to have become the first European victim of the deadly eastern equine encephalitis (EEE) virus. The man, 35, began to feel tired after he returned from a fishing holiday in Rhode Island, in the north east United States, with mosquito bites around his ankles. When the man, a painter from Livingston, West Lothian, went to see his general practitioner (GP), he suffered a seizure and then lost consciousness. If he lives, he is expected to be severely disabled for the rest of his life. His family is cautioning other holiday makers to be aware of the rare virus in the US. About a third of all those who contract the virus die. The EEE virus is regarded as one of the most serious mosquito borne diseases on the North American continent. It is found mainly in the eastern regions of the US, but transmission to human beings is rare. The man had traveled to the US in July. He spent 6 weeks with family and friends in Rhode Island and stayed in a log cabin on the Saco River in northern New Hampshire. He fell ill on Aug 31, a day after flying home. Within 2 days, he had lost consciousness and was transferred to the intensive care unit of Western General Hospital, in Edinburgh. The rare condition was diagnosed on Sep 13. The man is being cared for at the hospital's neurological unit, where he remains unconscious and unresponsive. (Viral encephalitis is listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

*Cases and outbreaks will be cited for suspect level with regards to suspicion of BT threat. Therefore, cases and outbreaks will be categorized as "Determined BT", "Suspect" or "Non-suspect".

OTHER RESOURCES AND ARTICLES OF INTEREST:

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: <http://bioterrorism.dhmd.state.md.us/>

Updated Information on Current Salmonella Outbreak Associated with Frozen Pot Pies

CDC is collaborating with public health officials in multiple states across the United States and with the U.S. Department of Agriculture's Food Safety and Inspection Service to investigate an ongoing multi-state outbreak of *Salmonella* I 4,[5],12:i:- infections in humans.

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

Questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail me. If you have information that is pertinent to this notification process, please send it to me to be included in the routine report.

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